

10/572080

APPLICATION DATA SHEET

Electronic Version v14

Stylesheet Version v14.1

*Applicant Information:***Inventor 1:**

| | |
|---------------------------------|------------------------|
| Applicant Authority Type: | Inventor |
| Citizenship: | US |
| Name prefix: | Mr. |
| Given Name: | Benjamin |
| Middle Name: | L. |
| Family Name: | MILLER |
| City of Residence: | Penfield |
| State of Residence: | NY |
| Country of Residence: | US |
| Address-1 of Mailing Address: | 17 Rolling Meadows Way |
| Address-2 of Mailing Address: | |
| City of Mailing Address: | Penfield |
| State of Mailing Address: | NY |
| Postal Code of Mailing Address: | 14526 |
| Country of Mailing Address: | US |
| Phone: | |
| Fax: | |
| E-mail: | |

Inventor 2:

| | |
|-------------------------------|---------------------|
| Applicant Authority Type: | Inventor |
| Citizenship: | US |
| Name prefix: | Mr. |
| Given Name: | Scott |
| Middle Name: | R. |
| Family Name: | HORNER |
| City of Residence: | Rochester |
| State of Residence: | NY |
| Country of Residence: | US |
| Address-1 of Mailing Address: | 127 Merriman Street |
| Address-2 of Mailing Address: | |
| City of Mailing Address: | Rochester |

| | |
|---------------------------------|--------------------|
| State of Mailing Address: | NY |
| Postal Code of Mailing Address: | 14607 |
| Country of Mailing Address: | US |
| Phone: | |
| Fax: | |
| E-mail: | |
| <u>Inventor 3:</u> | |
| Applicant Authority Type: | Inventor |
| Citizenship: | US |
| Name prefix: | Mr. |
| Given Name: | Lewis |
| Middle Name: | J. |
| Family Name: | ROTHBERG |
| City of Residence: | Pittsford |
| State of Residence: | NY |
| Country of Residence: | US |
| Address-1 of Mailing Address: | 8 Old Farm Circle |
| Address-2 of Mailing Address: | |
| City of Mailing Address: | Pittsford |
| State of Mailing Address: | NY |
| Postal Code of Mailing Address: | 14534 |
| Country of Mailing Address: | US |
| Phone: | |
| Fax: | |
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| <u>Inventor 4:</u> | |
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| Address-1 of Mailing Address: | 23 Highland Avenue |
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| State of Mailing Address: | NY |

Postal Code of Mailing Address: 14620
Country of Mailing Address: US
Phone:
Fax:
E-mail:

Correspondence Information:

Customer Number: 26774 *26774*

Application Information:

Title of Invention: DIAGNOSTIC SYSTEM FOR OTOLARYNGOLOGIC
PATHOGENS AND USE THEREOF

Application Type: regular, utility

Attorney Docket Number: 000176/61642

Botanic Information:

Publication Information:

Suggested Figure for Publication -

Suggested Classification -

Suggested Technology Center -

Total Number of Drawing Sheets -

Representative Information:

practitioner(s) at Customer Number:

26774 *26774*

as our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Domestic Priority Information:

This is a National Stage of US application number PCT/US2004/030644, filed 2004-09-20.

Foreign Priority Information:

Assignee Information: